

TRIACOL, ALPERS, IN PULMONARY AFFECTIONS

By DR. H. SPEIER, Rochester, Minn.

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MEDICAL science, from its earliest beginnings, has been strongly influenced by the desire to discover specifics, i. e., drugs which bear a definite curative relation to definite disease, being able to cure any uncomplicated case of it or at least hold it in check, as long as the remedy is employed. In fact, the whole tendency of modern serum therapy is in the direction of the discovery of specifics. Should it ever become established on a firm scientific basis, medicine will then have developed into an exact science or mechanical art. Diagnosis will not depend any longer on the uncertain subjective and so-called objective symptoms, palpation, percussion, auscultation, but be made by infallible instruments of precision, microscope, blood count, culture test. The remedy will not be questionable, but be as self-evident, as a mathematical formula. But the medical millennium having not yet been reached, we must content ourselves with ordinary medication. In the course of the last decade a remedy has gained increasing favor from medical men, so that at the present time it may almost be looked upon as a specific in bronchial and pulmonary affections, namely creosote and its derivatives. The exact *modus operandi* of this remedy is not clearly understood. But the beneficial clinical results of creosote are so generally attested, that they can no longer be doubted.

But a drawback to the use of the drug has manifested itself. To be of lasting benefit, especially in tubercular states, it must be employed for a long time and in constantly increasing doses.

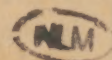
And then it has invariably set up serious gastric disturbance with consequent impairment of nutrition, so that it had to be interrupted or entirely given up. The difficulty has been somewhat overcome by the use of the carbonate of creosote, creosotal, or guaiacol, obtained by fractional distillation of beechwood creosote, and its carbonate, known as duotal. A still more satisfactory substitute has been found in potassium guaiacol-sulfonate. Experiments conducted on animals and clinically in the universities of Berne and Basle, Switzerland, as well as practical results reported from various parts of Germany, prove the new agent to be absolutely non-toxic and possessed of the remedial value of the original creosote. Analogous to the combination of guaiacol with potassium, Dr. Alpers, of New York, has elaborated a sodium compound, to which he gives the name sodacol, as that of potassacol to the former. To a combination of the two, for more rapid sedative effect, he adds a minute dose of the new morphine derivative ethacol, also combined with guaiacol. He has introduced this as elixir guaiacol comp., or under the shorter name of Triacol, to the medical profession. Being rather new this pharmaceutical product is not yet widely known, but a sufficient number of favorable reports of its usefulness have appeared. Induced by these and by theoretical reasoning from the formula of the compound, I have lately used Triacol in a number of cases with excellent effect.

CASE I. Mrs. H. M. S., aet. 33, Irish, married 9 years, never been pregnant, no menstrual

irregularities, height 5 feet 5 inches, weight 135 pounds. An active, energetic, handsome woman. Her health for several years has been rather indifferent. Eighteen months ago was operated on for appendicitis, at same time round ligaments were shortened and a small ovarion tumor (character unknown to me) removed. About one year ago she had exclusive care of a relative, who died in her house of consumption. Recently she has been in company for whole days at a time of a friend who is in an advanced stage of consumption and careless about her expectoration. Patient came under observation, because she was running down, lost twelve pounds in three months, appetite not good, no ambition for work or pleasure, very susceptible, often rise of temperature one to one and a half degrees, occasional slight night sweats, respiration over twenty, painful nontraumatic swelling on one knee. Auscultation gives prolonged expiration and higher pitch in right apex, percussion negative. Diagnosis: Incipient tuberculosis. Treatment: Triacol, dessertspoonful 3 times a day. At first the remedy was a disappointment, for patient reported that it caused her to vomit. But I regulated food carefully and changed dose to teaspoonful every 3 hours. After that it was taken without any further gastric disturbance. Result satisfactory. Cough was soon alleviated and gradually stopped, temperature brought to normal, appetite and nutritive assimilation improved, so that a slight gain in weight commenced after two weeks and has since continued. Now ten weeks after beginning treatment, she is practically well.

CASE 2. R. L., aet. 13 years 6 months, height 5 feet $5\frac{1}{4}$ inches, German. Father, like two of his brothers and sisters, inclined to cough and asthma. Boy's earlier history negative, except that he never was strong, always tall for his age, caught cold easily. Last spring had mumps, followed by one-sided orchitis, but was not seen by a physician. Since then has not been really well, easily tired. For a few weeks past frequent dry cough, a little pain in chest, some night

sweats, fitful appetite, frequent sensation of chilliness. He looks anemic, is languid, dull, temperature 99.5, respiration, 26, pulse 98. On auscultation cogwheel respiration, and percussion note dulled over left apex. Diagnosis: Incipient tuberculosis. Treatment: Triacol, teaspoonful every three hours. Good results soon apparent, improvement of all symptoms, return of appetite. No gastric disturbance caused by medicine. In both these cases to medicinal treatment was added forced feeding with albuminous foods, mainly milk and eggs to saturation.



CASE 3. Pneumonia, Mary S., aet. 23, single, teacher, past history good. Was caught in a rain-storm, while out driving and got a thorough wetting. Next day she had a severe chill, pain in right side of chest, cough, a few blood-streaks in expectoration, respiration 32, pulse 100, temperature 103.6, bronchial breathing over middle lobe of right lung, which became crepitant next day, slight dullness on percussion in same region. I intended to put her on creosote, but knowing her stomach to be irritable, I was afraid. Gave instead Triacol, teaspoonful every two hours. Case reacted well. Prompt fall and then gradual reduction of temperature, alleviation of pain and cough after twenty-four hours, improvement in appetite, so that patient was convalescent on fourth day.

A number of cases of cough of different character presented, several of prolonged grippe with more or less chronic bronchial irritation, one that of a man, age 59, a hay fever sufferer, whose night rest was much broken by cough. In all of them Triacol proved itself effective. Herein, in the coughs of autumn and winter and of badly cured influenza, I should judge from my experience, lies a wide field of usefulness for Triacol, which has the advantage over creosotal, that it is entirely free from unpleasant odor and taste and is easily borne by the most delicate stomach and readily assimilated.

H. SPEIER, M. D.

Rochester, Minn.

What Prominent Physicians say about Triacol, Alpers:

BRISTOL, CONN.

April 13, 1902.

I used the sample of Triacol in a case with results equally satisfactory to the patient and myself. The case was that of an elderly woman who was suffering from a severe attack of bronchial inflammation, with cough and shortness of breath, and a general condition of weakness simulating phthisis. But she was very speedily relieved, and indeed cured, without aid from any other medication.

DR. H. A. CARINGTON.

FALL RIVER, MASS.

April 9, 1902.

Have made a test of Triacol in one of my cases. In 18 hours I have noticed such a change that I think there is nothing like Triacol.

P. A. COLLET, M. D.

Member Board of Health.

HOPE MILLS, N. C.

October 20, 1902.

I have used Triacol with splendid results in a case of Bronchitis. I am convinced that it is a good preparation.

S. HIGHSMITH, M. D.

DETROIT, MICH.

November 25, 1902.

I used the sample of Triacol on a lady 68 years old. She has had chronic bronchitis for years, and at the time I commenced giving her Triacol she was raising large quantities of mucous every day, and coughing considerably. She is now on her second bottle; her cough is much better, and she raises very little. I am satisfied that you have a valuable preparation—one bound to afford relief to thousands suffering from bronchial troubles.

DR. E. C. LEE,

1475 Woodland Avenue.

WASHINGTON, D. C.

December, 11, 1902.

I used Triacol on a case of chronic bronchitis with profuse morning expectoration. It checked the cough and changed the sputum from yellowish green to mucous character, and decreased the amount.

G. H. HEITMULLER, M. D.

9th Street and Pa. Avenue, N. W.

EAST STONE GAP, VA.,

November 20, 1902.

I used Triacol in a case of incipient tuberculosis, and it seemed to give more relief from the harassing cough than anything the patient had used so far.

J. B. HARROLD, M. D.

LOCKLAND, O.

January 12, 1903.

I tried the sample of Triacol sent me on a case of pulmonary phthisis, complicated with hemorrhage, and had patient continue its use, and am now fully satisfied it is a meritorious product, and shall commend it in the future.

H. O. COOPER, M. D.

JEFFERSONVILLE, IND.

January 16, 1903.

I have used your Triacol in the treatment of coughs and in bronchial asthma with very good success, and shall continue to use it in all bronchial affections.

DR. J. LOOMIS,

215 E. Market Street.

MARYSVILLE, VA.

November 14, 1902.

I prescribed Triacol for a boy, 9 years, who had been suffering for about six weeks with a severe attack of capillary bronchitis, following whooping cough, and much benefit resulted from its use.

F. H. LUKIN, M. D.

PERU, IND.

January 17, 1903.

Am using Triacol in a case of chronic bronchitis with excellent results.

E. H. ANDREWS, M. D.

BOSTON, MASS.

April 29, 1902.

The results obtained from the use of Triacol in a case of bronchial trouble were very satisfactory; in fact, I think I had quicker results from the sample than from any preparation I have ever used in such cases.

H. B. McCONNELL, M. D.,
74 Boylston Street.

CHICAGO, ILL.

May 3, 1902.

The action of Triacol in Bronchitis is simply marvelous.

DR. P. S. ALLIS,
5124 Bishop Street.

SO. DANVILLE, N. Y.

October 10, 1902.

The sample of Triacol which I received I used in a case of incipient tuberculosis with marked results of improvement. I believe it to be the "exact thing" for all bronchial affections.

L. L. ACKLEY, M. D.

CLEARFIELD, PA.

August 29, 1902.

I used the sample of Triacol sent me in a case of capillary bronchitis with most gratifying results.

F. G. BENNETT, M. D.

CHICAGO, ILL.

June 11, 1902.

I gave Triacol to a lady 60 years of age, who is troubled with cough, bronchial, and at times has asthmatic symptoms also. Your remedy gave her a great deal of relief.

H. W. CASE, M. D.
3205 Cottage Grove Ave.

WADESBORO, N. C.

December 20, 1902.

I am very much pleased with the results obtained in a case of bronchitis in a man 65 years of age, with the sample of Triacol.

DR. R. B. BECKWICK.

LOOMIS SANITARIUM,

LIBERTY, SULLIVAN COUNTY, N. Y.

April 18, 1901.

DEAR SIR :

We have tried the bottle of Triacol which you so kindly gave us for experimental purposes. We think favorably of it, and kindly accept our order for one gallon of same.

LOUIS H. NEALLY, Supt.

As will be seen from the foregoing article, and the letters received from prominent practitioners, Triacol, Alpers, contains all the beneficial properties of Guaiacol and Creosote, without any of their drawbacks; it is palatable, easily digested, non-irritant, improves the appetite, and does not in the least recall the nauseating taste of other Guaiacol preparations. It is therefore indicated in **Bronchitis, Laryngitis, Chronic Coughs** of all kinds, **Bronchial Catarrh, Tuberculosis**, and all disorders of the respiratory organs. Triacol is also a speedy and reliable remedy in all cases of **Ulcerated** and **Malignant Sore Throat**, if used as a **Spray**.

Triacol, Alpers, is never advertised to the public, and no therapeutic advice of any kind is given, leaving diagnosis and treatment entirely to the physician. The original bottle, which should always be prescribed to avoid substitution, contains eight ounces, and the label bears the name and dose only. Triacol retails at one dollar the bottle.

Address all communications to

THE ALPERS CHEMICAL COMPANY,

4 & 6 White Street, New York.

Samples furnished free on application.